

Pack Your Bags and Go: USPHS Deployments

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Asian Pacific American Officers Committee (APAOC)

Education and Training Sessions: 20 April 2011



Photo: www.defenseimagery.mil



Importance of Deployment for Career Development

**Natural Disasters: Earthquakes,
Hurricanes, Flooding**

**National Security
and Special Events**

**Service Oriented
Missions**

**Humanitarian
Ship Missions**

Why Is it Important to Deploy?

- Addresses key elements of PHS mission:
 - Preparedness & response
 - Public service
- Challenges you to develop new skills and learn different roles
- Tests your ability to function in extremely stressful environments
- Offers opportunities to earn PHS honor and service awards:
 - OUC, Crisis Response Award, Field Medical Readiness Badge, Global Response Service Award
 - DHHS Secretary Commendation

Benefits from Deployment

- Provides personal and professional rewards:
 - See the immediate impact of your humanitarian actions
- Broadens your view:
 - Excellent opportunity to meet and work with officers from other agencies
- Offers avenues for leadership positions:
 - Leadership based on skill set, not necessarily rank or seniority

Benefits: II

- Provides opportunities for collaboration with many partners:
 - State and local health departments
 - Emergency response components of DHHS (Office of the Assistant Secretary for Preparedness and Response)
 - Local, state, national and global non-governmental organizations
 - Local universities: opportunities to lecture
- Strengthens sense of pride in PHS

Benefits: III

- Enhances our ties with other uniformed services through collaboration with Department of Defense (DoD):
 - Opportunity to teach military personnel about the PHS and demonstrate our expertise
- Builds relationships with disaster-related civilian groups:
 - State-level 'Disaster Medical Assistance Teams' (DMATs)
 - Medical Reserve Corps
- Allows you to travel to new areas!!

PHS Response to the 2010 Haiti Earthquake

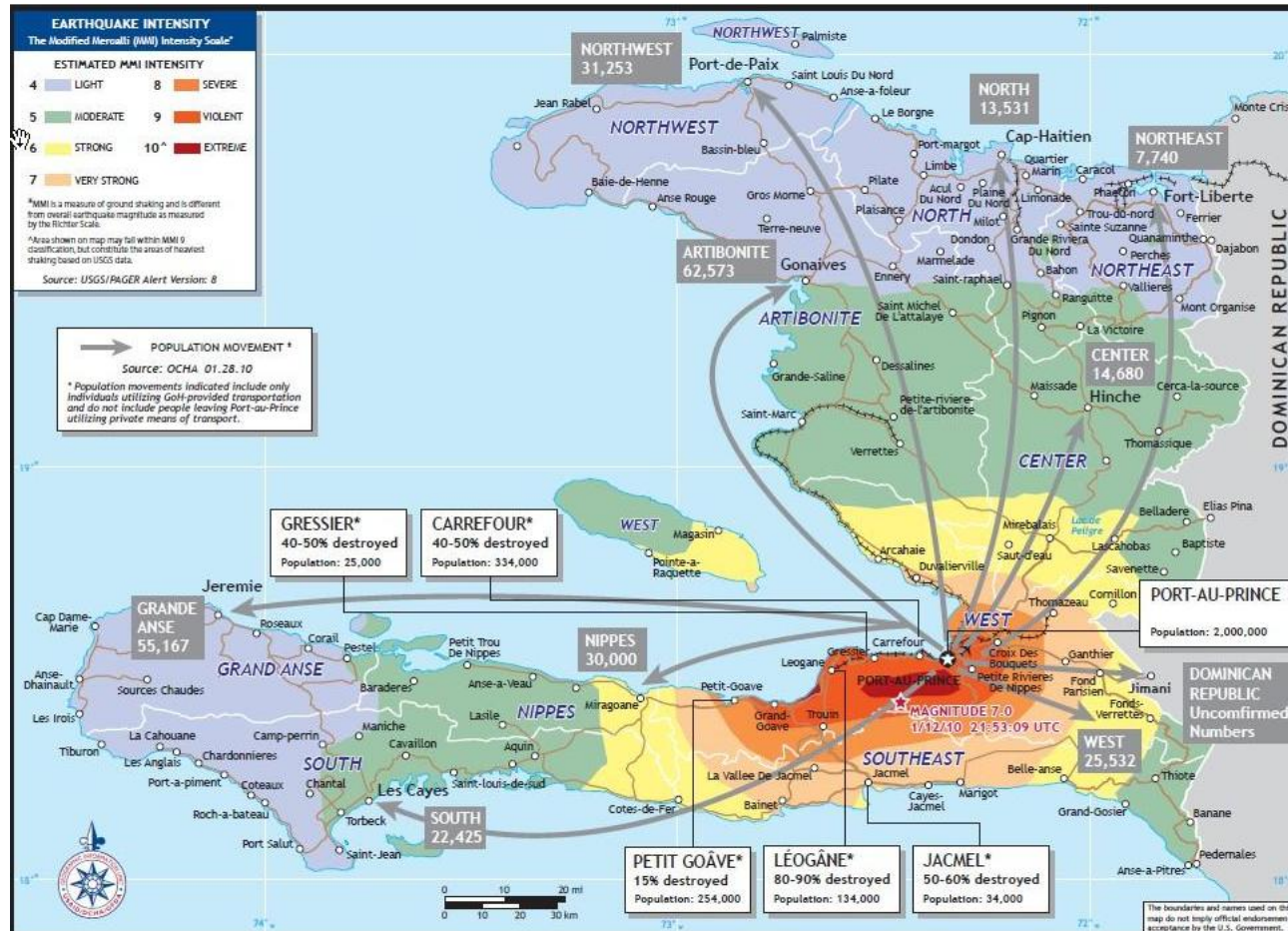


Haiti Earthquake, January 2010

Background

On January 12, a 7.0 magnitude earthquake hit Haiti at 1653 hrs, approximately 10 miles from Port-Au-Prince (near Leogane)

On January 20, at 0600 hrs, a 6.1 magnitude earthquake occurred with epicenter approximately 35 miles WSW of Port-Au-Prince.



Resulting Destruction





SHOP
PARTS
paration & Fabrication
Technologie Mécanique
générale
swald Durand
ail: F&F M.S @ Yaho
23-2233 / 2944-5364
21-5910

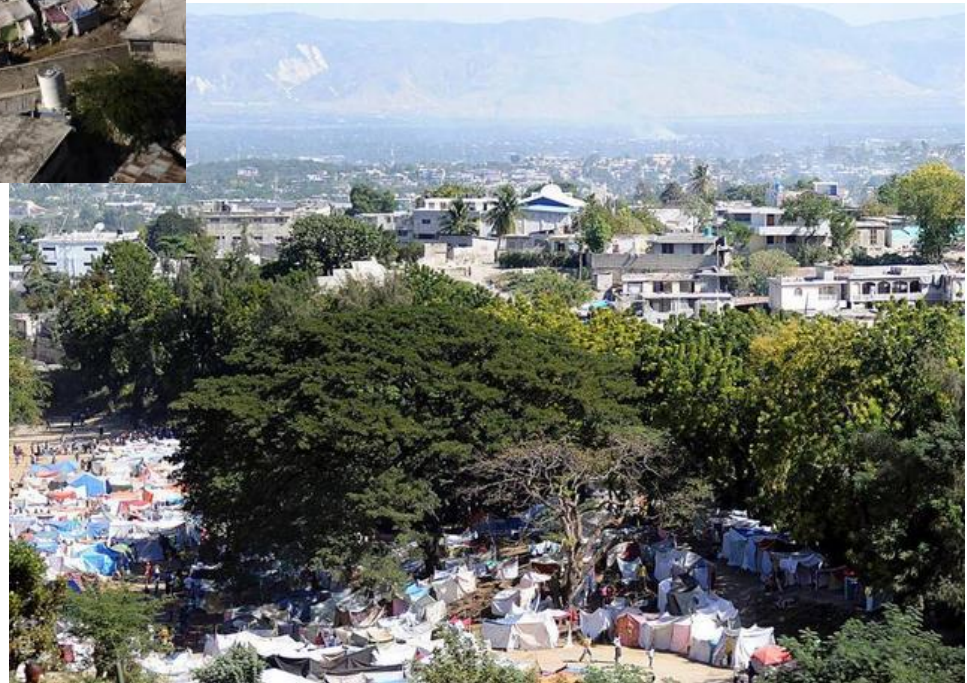
PIECE

DAIHATSU
ISUZU
CANTER
NATIVA
SUBARU
TOYOTA
NISSAN
MAZDA
TERIOS
RAV4
HONDA
4M41
FORWARD
TRACKER
4M40
SUZUKI

Internally Displaced Persons (IDPs)



**IDP Camps: 1.4
million Haitians
displaced**



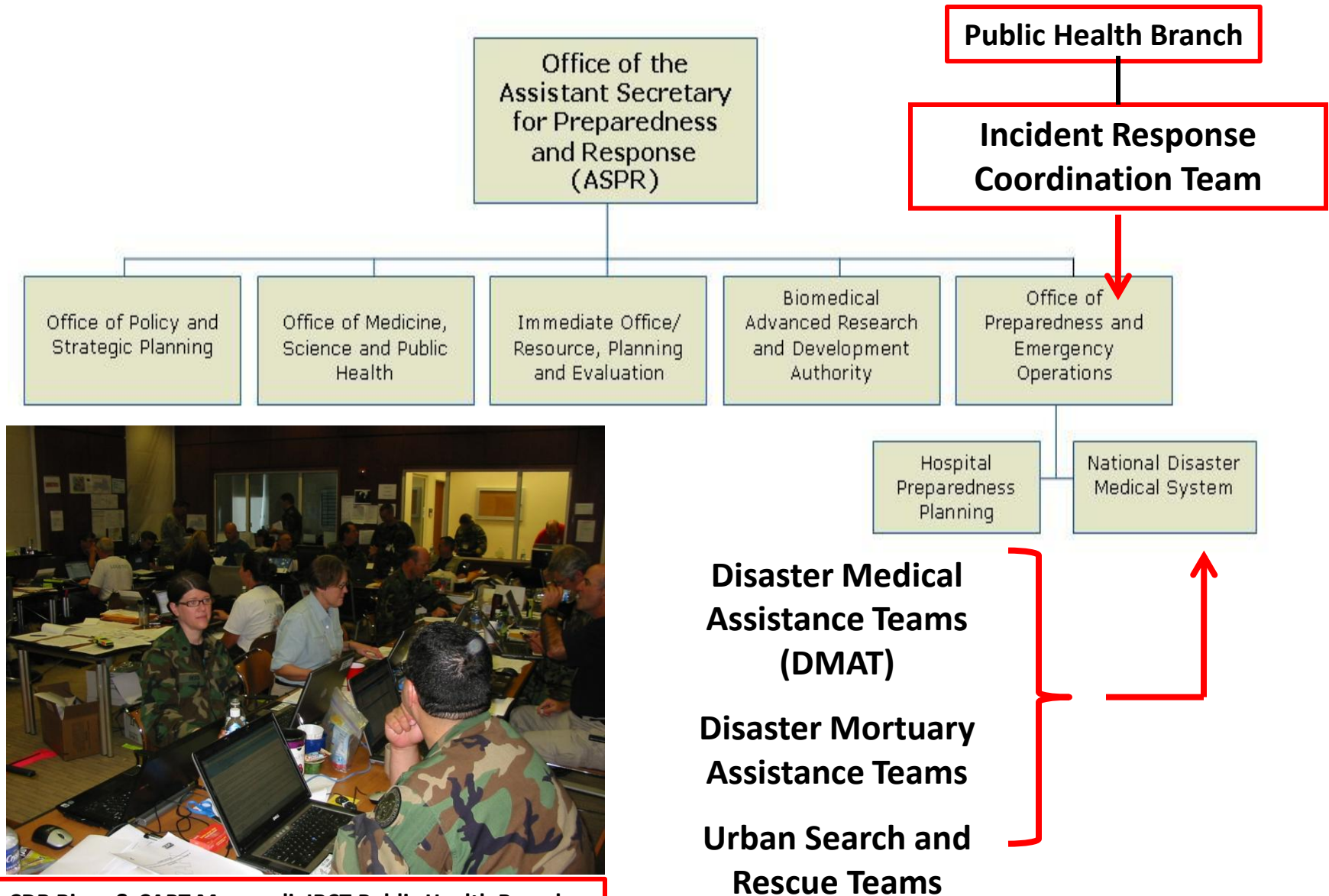
Photos: www.defenseimagery.mil





HHS Emergency Response

ASPR: Office of the Assistant Secretary for Preparedness and Response



CDR Riggs & CAPT Massoudi, IRCT Public Health Branch

HHS Addressing Health Needs

IRCT

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graph TD; IRCT --> DMATS[Disaster Medical Assistance Teams (DMATS)]; IRCT --> IMSuRTs[International Medical Surgical Response Teams (IMSuRTs)];
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**Disaster Medical Assistance
Teams (DMATS)**

**International Medical Surgical
Response Teams (IMSuRTs)**

GHESKIO DMAT Site





**Port Varreux:
Site of transfer
to USNS
COMFORT**

Functions of IRCT Public Health Branch

- Monitored all public health issues with HHS deployed assets through daily site visits to DMAT sites:
 - Monitored disease trends, assisted with and analyzed surveillance data (including injuries), conducted environmental health assessments, removed toxic waste, stressed use of Personal Protective Equipment & provided public health education
- Provided technical assistance to larger humanitarian effort



Insect bites on DMAT responder

Hazards

Standing Water After Rains: DMAT Work Space



**GHESKIO: DMAT &
IMSuRT site**



Vector Control



**Old tires: vector
breeding sites at
airport DMAT location**



Insufficient length of bednets

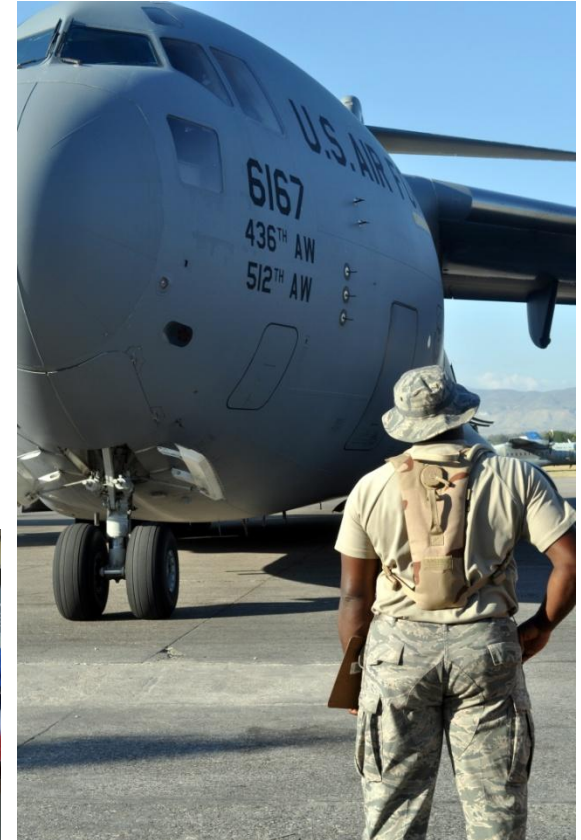
Extremely Poor Air Quality



Unrelenting Noise: Airport



**Lack of Ear
Protection**



Numerous Helicopter Hits to DMAT Sites



DMAT Sites: Testing for Quality and Contamination of Water



CDR Riggs doing coliform testing at DMAT site

**Testing for chlorine:
CAPT Williams & CDR
Grant**



Lack of Waste Removal: Biohazard and Other



**Look carefully: this has
both biohazard and
other trash**



Threat of Infectious Diseases Secondary to Living Conditions in IDP Camps



Life as a Responder

32 days: Four Tent Moves within Embassy Grounds



Austere Working Conditions



Difficult sleeping arrangements



**Toilet for
DMAT team**

**MREs for
32 days!**

Unique Features of Earthquake Response



Unique Features

- Re-orientation to care provided outside:
 - No one (affected community or responders) had a sense of physical security due to continued aftershocks of varying intensity
 - Stronger aftershocks continued to weaken vulnerable infrastructure
 - Affected community refused to stay inside buildings
- Initial response had to be tempered with lack of shelter for responders:
 - No appropriate billeting available as buildings collapsed or deemed unsafe

Medical Care Outside



Unique Features: II

- Massive trauma: crush injuries, severe head trauma, need for amputations:
 - 300,000 had earthquake-related injuries in Haiti
 - Estimated 4,000 amputations performed in first month:
 - For each amputation, 3 or more surgeries follow
- Need to re-think traditional surveillance and focus on injuries, as well as traditional surveillance issues:
 - Within three weeks, began to see patterns of pre-quake health needs

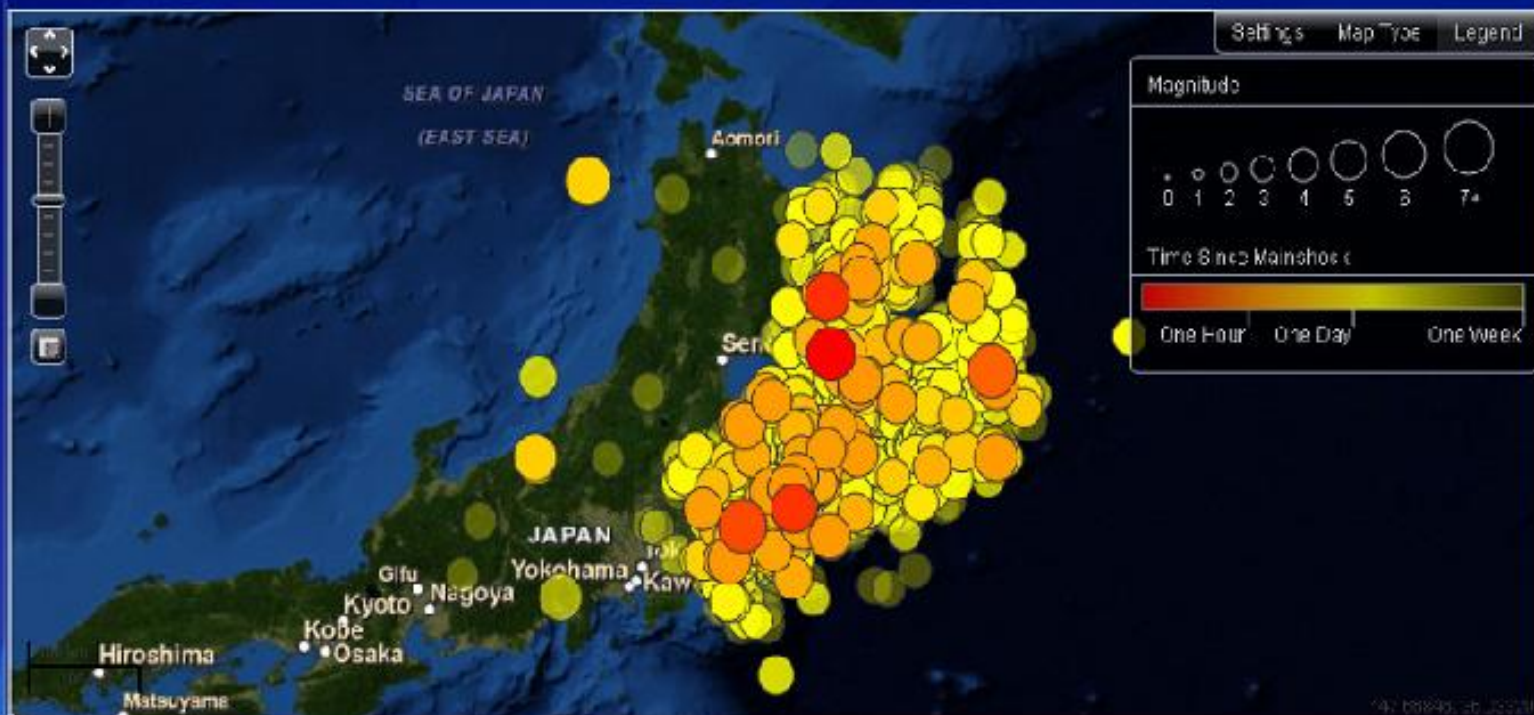
Japan Disaster, March 2011

Earthquake and Tsunami



Background

- Earthquake
 - Struck on 11 March 2011
 - Magnitude 9.0_{RICHTER}
- Tsunami
 - Earthquake resulted in tsunami waves up to 33 feet (10 m)
 - Smaller waves reached many other countries several hours later
 - Waves reached up to 6 miles (10 km) inland
 - Tsunami warnings issued and evacuations ordered along Japan's Pacific coast
- Tsunami warnings issued in at least 20 other countries, including the entire Pacific coast of North America and South America



Source: <http://earthquake.usgs.gov/earthquakes/seqs/events/usc0001xgp/>

Japanese DMATs

- Following the 1995 Hanshin-Awaji earthquake
 - Necessitated establishment of Disaster Medical Assistance Teams
 - In 2005, Japanese government's Central Disaster Prevention Council revised the Basic Disaster Management Plan
- Japanese description of a DMAT
 - Trained, mobile, self-contained medical team
 - 2 physicians, 2 nurses, 1 EMT, 1 logistician
 - Act in the acute phase of a disaster (48-72 hrs)
 - Personnel can deploy rapidly to any area of the country
- Coordinating with international medical relief teams
 - Medics sans Frontiers
 - International Medical Corps
 - Red Cross

HHS Activities

- **CDC**

- EOC activated to Level 2 on March 16, 2011
- Screening plan for travelers at US points of entry in collaboration with Customs and Border Protection
- Developed info for travelers who test positive for radioactive material
- Generating National Poison Data System reports
- Radiation subject matter experts deployed to Japan

- **FDA**

- EOC activated and responding to calls from the public
- Screening of products at US borders / protecting US food supply
- Developed policies and recommendations for manufacturers to donate drugs for humanitarian relief efforts
- Recommendations for products to treat radiation exposure

- **EPA**

- Stepped up monitoring of precipitation, air, milk, and drinking water in US

- **HHS/ASPR**

- Coordinating communication with health authorities in Japan

Service Oriented Missions

RAM events

- **Remote Area Medical Clinic**
 - Non-profit, volunteer, airborne relief corps dedicated to serving mankind by providing free care.
 - Health
 - Dental
 - Eye care
 - Veterinary services
 - Partner with local and state health departments and medical/dental nursing students from area universities
- **USPHS Missions**
 - 2010 USPHS Operation Nexus
 - Maryville, TN
 - Pikeville, KY
 - 2011 USPHS Operation Foothold
 - Pikeville, KY June 2011

National Level Exercise

- **NLE 2011 -- May 16-20, 2011**
 - White House directed Congressionally-mandated exercise that includes the participation of all appropriate federal department and agency senior officials, their deputies and staff; and key operational elements.
 - Simulate the catastrophic nature of a major earthquake in the central United States region of the New Madrid Seismic Zone (NMSZ).
 - The functional exercise offers agencies and jurisdictions a way to test their plans and skills in a real-time, realistic environment and to gain the in-depth knowledge that only experience can provide.
 - 8 states in Central US Earthquake Consortium
 - AL, KY, MS, TN, IL, IN, AR, MO

National Level Exercise

- **USPHS Mission Operation Foothold**

- May 2011 in Paducah, KY
- Partnering with state and local health departments

- **Assessment**

- Explain the concepts of vulnerability and risk within a population
 - Understand how coalitions are formed to respond to disasters
 - Conduct clinical and public health assessments

- **Analysis**

- Use computerized mapping programs databases and other resources
 - Compile and analyze a community profile
 - Maps identifying healthcare facilities
 - Demographic information
 - Buildings of opportunity for shelters or FMS

- **Implementation of sustainable inventions supporting continuity and recovery**

- Deliver health care and public health services to underserved
 - Identify strategies to increase policy for health services to all
 - Strengthen existing public health capacity for healthy and affordable food, promotion of physical activity and breastfeeding

Texas – Operation Lonestar

- **Medical clinics in South Texas July 2010 and 2011**
 - Joint exercise of state health and human services agencies, Texas Military Forces and county health departments
 - FREE medical services to under-served communities along the Texas Border.
 - Immunizations
 - Diabetic Screening
 - Blood-pressure Screening
 - Hearing and Vision Exams
 - Sports Physicals
 - Limited Pharmacy
 - Limited Dental Services
- **USPHS Mission Operation Foothold**
 - Assist with Operation Lonestar clinical care
 - Assist community with CASPER survey – potential topics
 - Preparedness communications
 - Violence
 - Dengue awareness
 - Assist community with environmental health concerns
 - School Sanitation
 - Well water evaluation
 - Vector control and community education
 - Assist community with mental health concerns/ planning

Thank You and Acknowledgements

- A HUGE thank you to the people of Haiti who shared their lives with us during this time of extreme stress
- Photo/slide credits include:
 - Defense Imagery Military
 - Dr. Susan Blank, NYC Dept of Health
 - Pan American Health
 - USPHS Officers:
 - CAPTs Holly Williams, Mehran Massoudi, Phil McRae and Peter Bloland
 - CDRs Daphne Moffett, Margo Riggs
 - LCDR Roque Miramontes
- Thank you for allowing us this opportunity to share these insights

